Case 18-17467-VFP Filed 08/14/19 Entered 08/14/19 15:31:20 Desc Main Doc 53

		Document	Page 1 OF /
Fill in this info	rmation to identify your	case:	
Debtor 1	Jack Heinz Sanda	au	
	First Name	Middle Name	Last Name
Debtor 2	Loretta Marie Sar	ndau	
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	18-17467		
(II KIIOWII)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	as complete and accurate as possible. If two married people are filing together, both are equally responsible fo rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	382,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	130,367.65
	1c. Copy line 63, Total of all property on Schedule A/B	\$	512,867.65
Par	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	396,716.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,267.10
	Your total liabilities	\$	417,983.10
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,842.82
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,569.40
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to
Off	icial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

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Debtor 1 Jack Heinz Sandau Debtor 2 Loretta Marie Sandau

Case number (if known) 18-17467

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______4,825.69

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,000.00

Fill in this information	to identify your case:	
Debtor 1	Jack Heinz Sandau	
Debtor 2 (Spouse, if filing)	Loretta Marie Sandau	
United States Bankru	ptcy Court for the: DISTRICT OF NEW JERSEY	
	3-17467	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forn	<u>n 106l</u>	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,		☐ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed
	employers.	Occupation	Retired	Disabled
	Include part-time, seasonal, or self-employed work.	Employer's name		
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed the	nere?	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 1,570.83 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

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Deb	tor 1 tor 2	Jack Heinz Sandau Loretta Marie Sandau		Ca	ase number (<i>if known</i>)	18-17467	,	
	Сор	y line 4 here	4.		For Debtor 1 1,570.83	For Debt	tor 2 or g spouse 0.00	
_	Liet	all payrell deductions						-
5.	5a.	all payroll deductions:	Eo		\$ 187.03	æ	0.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		\$ 187.03 \$ 0.00	\$ \$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00 \$	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00	\$	0.00	-
	5e.	Insurance	5e.		\$ 0.00	\$	0.00	-
	5f.	Domestic support obligations	5f.		\$ 0.00	\$	0.00	_
	5g.	Union dues	5g.	9	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.+	+ 5	\$ 0.00	+ \$	0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	187.03	\$	0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,383.80	\$	0.00	-
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 0.00	\$	0.00	-
	8b.	Interest and dividends	8b.	5	\$ 0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	Ş	\$ 0.00	\$	0.00	-
	8d.	Unemployment compensation	8d.	5	\$ 0.00	\$	0.00	-
	8e.	Social Security	8e.	5	0.00	\$	1,390.00	_
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	_ 8f. 8g. _ 8h.+	9	\$ 0.00 \$ 3,069.02 \$ 0.00	\$ + \$	0.00 0.00 0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,069.02	\$	1,390.00	0
				_				_
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	_	4,452.82 + \$_	1,390.0	00 = \$ _	5,842.82
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your principle of relatives. The include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•	ed in <i>Sched</i>	dule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies				, if it	2. \$	5,842.82
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?					y income
	П	Yes. Explain:						

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Jack Heinz S	Sandau			Che	eck if this is:	
							An amended filing	
Deb	otor 2	Loretta Mari	e Sandau	Ī				wing postpetition chapter
(Spo	ouse, if filing)				_		13 expenses as of	the following date:
Unit	ed States Bankr	uptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
Cas	e number 18	3-17467						
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/15
info	ormation. If m mber (if know	ore space is ne n). Answer eve	eded, atta ry question	If two married people ar ch another sheet to this n.				
Par 1.	Is this a join	ibe Your House nt case?	noia					
	□ No. Go to							
			in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Del	btor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Developer	d						□ No
	Do not state dependents				Son		24	■ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
_	D							☐ Yes
3.	expenses of	enses include f people other t d your depende	:han ┌┐	No Yes				
Par		ate Your Ongoi						
exp	imate your ex enses as of a plicable date.	penses as of your date after the	our bankrı bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo plemental <i>Schedul</i> e	orm as a s J, check t	upplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
the	value of such	n assistance an		government assistance i	•			
(Off	ficial Form 10	61.)					Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgage	4.	\$	1,200.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
		•		ıpkeep expenses		4c.	\$	0.00
		owner's associat				4d.	·	0.00
5	Additional r	nortagae navm	ante for w	our residence, such as ho	me equity loans	5	2	0.00

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btor 1 Jack Heinz Sandau btor 2 Loretta Marie Sandau	Case number (if known)	18-17467
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	450.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	314.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	910.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	20.00
Personal care products and services	10. \$	50.00
Medical and dental expenses	11. \$	100.00
Transportation. Include gas, maintenance, bus or train fare.	•	
Do not include car payments.	12. \$	200.00
. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	20.00
Charitable contributions and religious donations	14. \$	0.00
. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	45 ^	
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	299.25
15d. Other insurance. Specify: Motorhome Insurance	15d. \$	82.34
Service plan on motorhome	\$	150.61
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify: Taxes withheld from wife's Social Security	16. \$	198.70
Specify: Taxes withheld from husband's pension	\$	574.50
Installment or lease payments:	47- 0	
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report a		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l) Other payments you make to support others who do not live with you.). 10. \$	
	φ 19.	0.00
Specify: Other real property expenses not included in lines 4 or 5 of this form or on Sci		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
Other: Specify:	21. +\$	0.00
Опот. Оробиу.	Δ1. ΤΨ	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	4,569.40
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,569.40
		,
Calculate your monthly net income.	22a •	5.040.00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,842.82
23b. Copy your monthly expenses from line 22c above.	23b\$	4,569.40
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	1,273.42
Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.	you file this form?	crease or decrease because of a
Yes. Explain here: None expected.		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jack Heinz Sanda	au		
	First Name	Middle Name	Last Name	
Debtor 2	Loretta Marie Sar	ndau		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERS	SEY	
_	18-17467			
(if known)				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have that they are true and correct. X /s/ Jack H. Sandau Jack Heinz Sandau Signature of Debtor 1	x /s/ Lorretta M. Sandau Loretta Marie Sandau Signature of Debtor 2